STATEMENT OF ORGANIZATION		UFFICE USE (
Name and Address of Committee	2. Date of this Statement	PAC
Louisiana Orthopaedic PAC	1-22-15	5/0
PDB0X 80053	3. Estimated Membership	1/24
BAton ROUSE LA 70898	200	
Check If:	4. Amended Statement?	
New CommitteeMonthly Filer	YesNo	# 896 50 9 50
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)		
a. Name b. Position c. Address		
Dr Clark Gunderson chairperson 2615 Enterprise Blvd Læke Chades		
The solid	www.rest St. #110	70001
 Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) 		
a. Name b. Address		c. Relationship to Committee
Louisiana Orthopaedic ASSN POBOX 80053 BAton Rouge LA 70898		
 All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) 		
a. Name b. Address Compared to the second		
Capital One Sank, 301 Main St. BAtan Roys LA		
		70801
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary Committee		
b. Name of Candidate		c. Office Sought by the Candidate
		(~)
9. a. Name of Person Preparing Report () A () () 7 () 9 7 2 15 9 9		
b. Daytime Telephone	alshop (00	
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.		
This 22 day of January 201	5.	
	- 20	9 43/-2225
Signature of Committee Chairperson Signature Telephone Number		
,	2-4,0	,
Mark Juan MD	50	4-349-6804
Signature of Committee Treasurer, if any	Dayl	ime Telephone Number